

L12000126746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W12-50491

Office Use Only



700240194767

10/01/12--01016--019 **125.00

APPROVED
AND
FILED
12 OCT -3 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 4 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2012

ROBIN KRAEMER
2705 BRIANHOLLY DRIVE
VALRICO, FL 35596

SUBJECT: BLINGTASTIC DESIGNS
Ref. Number: W12000050491

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 OCT -3 PM 12:49

APPROVED
AND
FILED

We have received your document for BLINGTASTIC DESIGNS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 412A00024440

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blingtastic Designs

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robin Kraemer

Name of Person

Blingtastic Designs

Firm/Company

2705 Brianholly Drive

Address

Valrico, FL 35596

City/State and Zip Code

rrkraemer@verizon.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Kraemer

Name of Person

at (813) 417-2313

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

12 OCT -3 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blingtastic Designs, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

2705 Brianholly Drive
Valrico, FL
33596

Mailing Address:

2705 Brianholly Drive
Valrico, FL
33596

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Robin Kraemer
Name
2705 Brianholly Dr
Florida street address (P.O. Box **NOT** acceptable)
Valrico FL 33596
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Robin Kraemer
Registered Agent's Signature (REQUIRED)

(CONTINUED)

APPROVED
AND
FILED
12 OCT -3 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

Robin Kraemer, MGRM

2705 Brianholly Drive

Valrico, FL

33596

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/1/2012. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Robin Kraemer "MGRM"

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Robin Kraemer "MGRM"

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

APPROVED
AND
FILED

12 OCT -3 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA